



ESF 8 Health & Medical Area Command Bulletin

PREPARING FOR HIN1 FLU RESPONSE

August 14, 2009 Bulletin #4

The Situation:

The novel H1N1 influenza virus, which emerged during the spring, continues to circulate in the United States and globally. Health officials are monitoring disease spread and paying close attention to illness patterns to help inform planning for a second wave of novel H1N1 flu this fall. The severity of the novel H1N1 strain is anticipated to be similar to what was experienced this spring; however there may be more widespread outbreaks resulting in more persons becoming ill and seeking medical care. In addition, normal seasonal influenza will also be in the community this fall and winter. The novel H1N1 strain is expected to be the predominant strain. Currently pregnant women, children and individuals with certain underlying health conditions¹ appear to be at higher risk for severe illness. Federal health officials have emphasized the need for vaccine distribution planning by state and local officials for the novel H1N1vaccine, as a key component of disease mitigation strategies this fall. In addition, health officials will be focusing on public education about individuals, businesses, community organizations, schools and others can do to reduce the spread of disease in the community.



Vaccine News:

On July 29th, 2009 the Center for Disease Control and Prevention's (CDC) Advisory Committee on Immunization Practices (ACIP), a panel made up of medical and public health experts, met to make recommendations on who should receive the new novel H1N1 vaccine when it becomes available, and to determine which groups of the population should be prioritized to receive the vaccine if the vaccine is initially available in limited auantities. Based on these recommendations, the Centers for Disease Control has advised that the following five key populations be the focus of initial vaccination efforts:

- preanant women,
- people who live with or care for children younger than 6 months of age,
- healthcare and emergency medical services personnel,
- persons between 6 months through 24 years of age, and
- people aged 25-64 years who are at higher risk for novel H1N1 because of chronic health conditions or compromised immune systems¹.

The CDC does not expect a shortage of novel H1N1 vaccine, but availability and demand may be unpredictable. If further prioritization within these categories is needed due to extremely limited vaccine availability, the CDC has advised that the following groups should be prioritized until vaccine supply increases:

- pregnant women
- people who live with or care for children younger than 6 months of age
- health care and emergency medical services personnel with direct patient contact,
- children 6 months through 4 years of age, and
- Children, 5 through 18 years of age who have chronic medical conditions.

The novel H1N1 vaccine will require two doses to be given at least 21 days (3 weeks) apart. In addition, it is recommended that seasonal flu vaccine be given to all patients as early in the season as possible. The current assumption is that seasonal flu vaccine can be given at the same time as the novel H1N1 vaccine.

Public Health strongly recommends that all individuals, including those who are not in the high risk or priority groups for the novel H1N1 vaccine, receive the seasonal flu vaccine.

About this Bulletin:

Public Health -Seattle & King County has activated the Health & Medical Area Command to coordinate health, medical and mortuary planning for regional hazards including H1N1 influenza and the Howard Hanson Dam –Green River Valley flood risks. We will be issuing bi-monthly bulletins on each of these topics to outline key situational updates. planning activities and information specific to health. medical and mortuary response.

*Sign up for email alerts

from Public Health – Seattle & King County about H1N1 Influenza

http://www.kingcounty.gov/healthservices/health/preparedness/pandemicflu/swineflu.aspx

¹ High risk health conditions include: chronic lung (including asthma) or cardiovascular (except hypertension), kidney, liver, neurological/neuromuscular, blood system, or metabolic disorders (including diabetes mellitus) and immune system suppression (including that caused by medications, treatments or by HIV).

For tomorrow's emergency VOLUNTEER TODAY!

King County Public Health Reserve Corps needs medical and non-medical volunteers during public health emergencies and major disasters! Visit www.kingcounty.gov/health/phrc or email phrc@kingcounty.gov.

Vaccine News Continued:

Public Health is currently working with the Washington State Department of Health and the CDC to finalize a federal vaccine distribution plan. The CDC has contracted with McKesson to be the distributor for the vaccine. Local strategies for distributing the vaccine are in development and will focus on utilizing existing vaccine distribution systems including working with healthcare providers, mass vaccinators, Public Health clinics, private providers and pharmacies.

New Guidance on How Long those Sick with Influenza-Like Illness Should Be Away from **Others**

On August 5, 2009 the CDC released updated guidance on how long individuals that have been sick with influenzalike illness should remain away from others. The new guidance recommends that people with influenza-like illness should remain at home until at least 24 hours after they are free of fever or free of signs of a fever without the use of fever-reducing medications. A fever is defined as 100° F or 37.8°C or greater.

The new recommendation applies to camps, schools, businesses, mass gatherings, and other community settings where the majority of people are not at increased risk for influenza complications. This guidance does not apply to health care settings where the exclusion period should be continued for 7 days from symptom onset or until the resolution of symptoms, whichever is longer. It is important to note that this guidance is based on current assessment of the severity of illness related to novel H1N1 influenza. These recommendations may change if the severity of novel H1N1 influenza changes.

For more information on the new recommendations see:

For more information about guidelines for infection control in the healthcare setting see:

http://www.cdc.gov/h1n1flu/guidelin

CDC Issues New Recommendations for **Schools**

The CDC has issued new guidance for schools and health officials on strategies for responding to novel H1N1 flu, depending on how severe the flu may be in their communities. The new quidance encourages health officials and school administrators to balance the risk of flu in their communities with the disruption that school dismissals will cause in education and the wider community. If the severity of the flu is similar to what we experienced during the spring, the CDC guidance recommends:

- keeping sick kids and staff at
- encouraging basic respiratory etiquette such as hand washing and covering noses and mouths when coughing or sneezing
- separating sick staff and students from others in the school until they can be sent home
- routine cleaning of common areas and surfaces
- early treatment of high risk students and staff who become sick; and
- selective school dismissal, particularly for schools serving students at high risk of complications due to flu (e.g. pregnant students or medically fragile children)

If the novel H1N1 influenza strain becomes more severe, the CDC may have additional recommendations, which may involve differing levels of school closures. The complete list of recommendations for schools is available at:

http://flu.gov/plan/school/index.html

public health

Dr. David Fleming Discusses Plans for H1N1 Vaccine Distribution NPR

10 Action Steps for Medical Offices & **Outpatient Facilities**

Business Resiliency for

Healthcare http://www.kingcounty.gov/health services/health/preparedness/hcg oalition/surgecapacity.aspx#br

General Business and Workplace Guidance for the Prevention of Novel Influenza A (H1N1) Flu in Workers

http://www.cdc.gov/h1n1flu/guida nce/workplace.htm

Cleaning & Disinfecting Surfaces to Prevent the Spread of Flu Virus

efault.htm#fact

Facemask & Respirator

http://www.cdc.gov/h1n1flu/mask s.htm

Stop Germs, Stay Healthy campaign

http://www.kingcounty.gov/health services/health/communicable/sto pgerms/posters.aspx

For previous ESF 8 Health & Medical Area Command bulletins that include planning assumptions visit:

http://www.kingcounty.gov/health services/health/preparedness/pan demicflu/swineflu/public.aspx

Please email

Washington State Department of Health